

Please type a plus sign (+) inside this box T Under the Paperwork Reduction Act of 1995, no persons are required to re	U.S. Patent and Trac	lemark (PTO/SB/01 (for use through 10/31/2002. OMB 065 Office; U.S. DEPARTMENT OF COMM nless it contains a valid OMB control n	1-0032 IERCE
	Attorney Docket Number First Named Inventor		1375P03US	
DECLARATION FOR UTILITY OR DESIGN			PUTTI, George	
PATENT APPLICATION	COMPLETE IF KNOWN			
(37 CFR 1.63)	Application Number	09	982,977	
☐ Declaration ☐ Declaration Submitted OR Submitted after Initial	Filing Date	10/22/2001		
	Group Art Unit	1723	3	

Filing (surcharge (37 CFR 1.16 (e))

required)

with Initial Filing

Attorney Docket Nur	nber 1375P0305			
First Named Inventor	PUTTI, George			
COMPLETE IF KNOWN				
Application Number	09 / 982,977			
Filing Date	10/22/2001			
Group Art Unit	1723			
Examiner Name	T. Soohoo			

As a below named inventor, I hereby declare that:						
My residence, mailing address, and citizenship are as stated below next to my name.						
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
TRAVELLING EXTRUSION I	MACHINE					
the specification of which	σ	itle of the Invention)				
is attached hereto OR as United States Application Number or PCT International [X] was filed on (MM/DD/XXXX)						
was filed on (MM/DD/YYYY)	10/22/2001			(if applicable).		
Application Number 09/982,977 and was amended on (MM/DD/YYYY)						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)		Certified Copy Attached? YES NO		
veamosito		(111100)	0000			
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.						
Application Number(s)	Filing Dat	e (MM/DD/YYYY)	Addition:	al provisional application		
9/007,152	01/14/19	01/14/1998		numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.		

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the Individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Pat nt Application

Direct all correspondence to: X Customer Number or Bar Code Label OR Correspondence address below						
Name						
Address	Address					
Address						
City				State	٠	ZIP
Country		Telephone	Đ			Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:						
Given Name George Family Name Putti or Surname						
Invested to the first terms of t						Date 7EB.05-00 2
Residence: City West Vancouver			B0 State		Canada Country	Cltizenship
1336 Camridge Place Mailing Address						
Mailing Address						
City West Vancouver	State	вс		ZIP	V7S 2M9	Canada Country
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) Family Name or Surname						
Inventor's Signature Date						
Residence: City			State		Country	Citizenship
Mailing Address						
Mailing Address						
City State ZIP Country Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						